

CLAIMS ONLY						Application Number 09/807,541		Filing Date			
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1	/						51	/			
2		/					52	/			
3	X						53	/			
4	X						54	/			
5	X						55	X			
6	X						56	X			
7		/					57	/			
8		/					58	/			
9		/					59	/			
10		/					60	/			
11	/						61	/			
12		/					62	/			
13		/					63	/			
14		/					64	/			
15	/						65	X			
16		/					66	X			
17		/					67	/			
18		/					68	/			
19		/					69	X			
20		/					70	X			
21		/					71	X			
22		/					72	/			
23		/					73	X			
24		/					74	/			
25		/					75	/			
26		/					76	/			
27		/					77	/			
28		/					78	/			
29		/					79	/			
30		/					80	/			
31		/					81				
32		/					82				
33		/					83				
34	/						84				
35	X						85				
36	X						86				
37	/						87				
38		/					88				
39		/					89				
40		/					90				
41		/					91				
42		/					92				
43		/					93				
44	/						94				
45		/					95				
46		/					96				
47	/						97				
48	/						98				
49	/						99				
50	/						100				
Total Indep	8						Total Indep				
Total Depend	53						Total Depend				
Total Claims	61						Total Claims				